GUARDIANSHIP and CONSERVATORSHIP



Get a Permanent Appointment for an Adult

Part 2: Service and Notice of the Court Hearing (Forms Packet)

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Self-Service Center

APPOINTMENT OF A PERMANENT GUARDIAN AND/OR CONSERVATOR FOR AN ADULT

PART 2: PREPARING SERVICE AND NOTICE OF THE COURT HEARING (Forms Only)

This packet contains court forms for preparing service and notice of the court hearing. Be sure the documents are in the following order:

Order	File Number	Title	No. Pp.
1	PBGCA2ft	Table of forms/instructions in this packet	1
2	PBGCA2k	Checklist for Service	1
3	PBGC18f	"Notice of Hearing"	1
4	PBGC19f	"Waiver of Notice of Hearing"	1
5	PB21f	"Affidavit of Acceptance of Personal Service"	1
6	PB24f	"Affidavit of Publishing Notice"	2
7	PB25f	"Affidavit of Publication"	1
8	PBGC29f	"Proof of Notice of Hearing"	2

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Self-Service Center

SERVICE AND NOTICE APPOINTMENT OF GUARDIAN AND CONSERVATOR

CHECKLIST

Use the forms and instructions in this packet only if the following factors apply to your situation:

- ✓ You want to have the court appoint a guardian and conservator for an adult.
- ✓ You filed or will file the court papers to ask for the appointment.
- ✓ You need to give notice of the court case to interested parties or other persons entitled to notice.

READ ME: It is very important for you to know that when you sign a court document, you may be helping or hurting your court case. Before you sign any court document, or get involved with a court case, it is important that you see a lawyer to make sure you are doing the right thing. The Self-Service Center has a list of lawyers who can give you legal advice and can help you on a task-by-task basis for a fee. If you want to know more about our list of lawyers and our list of mediators, ask the Self-Service Center staff.

	of Person Filing Document:	
Addres	ss:tate, Zip Code:	
Teleph	one Number:	
	ey Bar Number (if applicable):	
	senting Self (Without a Lawyer) or property or the second	
		L
	SUPERIOR COURT	
	MARICOPA C	OUNTY
	Matter of (check one or both) ardianship ☐ Conservatorship of	Case Number: PB
	Training Conservatorship of	NOTICE OF HEARING REGARDING
		(Check one box)
☐ an A	Adult	Guardianship
		☐ Conservatorship☐ Guardianship and Conservatorship
		Accounting
advice.	NOTICE IS GIVEN that the Petitioner has filed with papers (List the title of the Petition and the titles of all pages)	
	1	
	2	
	3	
	4	
	5	
2.	COURT HEARING . A court hearing has been sch court papers as follows:	eduled to consider the Petition and matters in the
	DATE AND TIME:	
	PLACE:	
	JUDICIAL OFFICER:	
3.	RESPONSE TO PETITION. You can file a writte Response, file the original with the court, provide a cop and mail a copy to all interested parties at least five (5 appear in person at the hearing. You must appear at the second	by to the office of the judicial officer named above, business days before the hearing. Or, you can
	DATED:	
	(Month/Day/Year)	Petitioner's Signature

	Name:	
	Address:	
	City, State, Zip Code: Telephone Number:	
Attorr	ney Bar Number (if applicable):	
Repre	esenting Self (Without a Lawyer) OR torney for	
	SUPERIOR CO	URT OF ARIZONA
	MARICOF	PA COUNTY
In the	Matter of (check one or both)	Case Number: PB
∏Gua	ardianship Conservatorship of	WAIVER OF NOTICE OF HEARING ON PETITION REGARDING (Check one box) Guardianship and Conservatorship
□an	Adult or a Minor	Guardianship Guardianship Conservatorship
STATE OF ARIZONA) County of Maricopa) ss.		Accounting
1.	court papers: (Check the box next to the docum "Petition for Permanent Appointment of Guardianship, Conservator or Both" Guardian, Conservator, or Both"	"Affidavit of Person to be Appointed"
	 "Petition for Guardianship/Conservators "Consent of Parent to Guardianship, Conservatorship, or Both" 	"Petition for Approval of Accounting"
2.	RELATIONSHIP: My relationship to the person who is named in the caption above as incapacitated or protected is (explain):	
3.		earing or court proceeding in connection with this matter. In a written document with the court under this court case of hearings and other court proceedings.
		Signature
SUBS	CRIBED AND SWORN to before me this date:	(Month/Day/Year) by
My Co	ommission Expires:	(Month/Day/Year)
my Commission Expires.		Deputy Clerk/Notary Public

Your Name: Your Address: Your City, State, ZIP Code: Your Telephone No: State Bar No. (if applicable): Representing Self (Without Attorney) or Attorney for Petitioner or Respondent		
IN THE SUPERIOR COURT O	OF ARIZONA, MARICO	PA COUNTY
Regarding the matter of	Case No:	
(name)	ACCEPTANCE OF	SERVICE
THE PERSON WHO SIGNED BELOW MAKES	THESE STATEMENTS UNDER	OATH:
 I acknowledge that I have voluntarily accepted. 		apers: (List) - -
3. 4. 5.		- - -
I waive formal service of process (personal service same as if I were personally served under Arizon		g these papers, it is the
I am aware that my accepting service of thes any way reduce my rights or obligation to file		
 I am not in the military forces of the United S of the Soldiers and Sailors Relief Act. 	tates of America in any capacity	or I waive the protection
Signat	ure	
SUBSCRIBED AND SWORN to before r		20
	Notary Public	
My Commission Expires:	-	

Your Your Your Attor	orney Bar Number (if applicable): presenting	
Rega	garding the Matter of	Case Number: PB AFFIDAVIT SHOWING CIRCUMSTANCES WHY NOTICE BY PUBLICATION WAS USED
(Nam	ame)	AND ABOUT THE PUBLICATION
1.	I am the Petitioner or Applicant and make this was used, and to show how service by publications.	Affidavit to show the circumstances why notice by publication tion was done.
2.	Here are the names of people entitled to notice Name:	e of this matter to whom I gave notice by publication:
	Last Known Address:	
	Last Date I Tried to Find Person:	
	Relationship of Person to this Case:	
	Name:	
	Last Known Address:	
	Relationship of Person to this Case:	
	Name:	
	Last Date I Tried to Find Person:	
	Relationship of Person to this Case:	
	Name:	

2.	I made a diligent search to find out the residence and whereabouts of the people entitled to notice, but the search has failed to reveal any information concerning their residence or whereabouts.
3.	I contacted the persons listed below to find out the location of the following people entitled to notice:
	Name of Person I am Looking for: Name of Person I Contacted: Address of Person I Contacted:
	Address of Person I Contacted:
	Name of Person I am Looking for:
	Name of Person I am Looking for:
	Name of Person I am Looking for:
4.	□NOTICE OF HEARING or □ NOTICE TO CREDITORS was published in a newspaper in this County on the following dates.
	A/, B, C
5.	I have read this statement and know of my own knowledge that the facts stated herein are true and correct
	Petitioner's Signature
	SUBSCRIBED AND SWORN to before me this date:, by
	(Month/Day/Year)
	Notary Public/Deputy Clerk My Commission expires:
	wy Continiosion Expires.

Name of Person Filing Document:		
Your Address:		
Your City, State, Zip Code:		
Your Telephone Number:		
Attorney Bar Number (if applicable):_	er) OR Attorney for	
Representing _ Self (without a Lawy	er) OR Attorney for	
SUPE Regarding the Matter of	ERIOR COURT OF ARIZONA MARICOPA COUNTY Case Number: PB	
Regarding the Matter Of	Case Nulliber. Fb	
	AFFIDAVIT OF PUBLICATION	
(NAME)		
1. Attached to this page is the original	nal Affidavit of Publication from the Newspaper.	
DATED:		
	Signature of Person Filing Document	

Your I	Jamo:			
	Name. Address	 s:		
Your (City, Sta	ate, Zip Code:		
Your 7	Telepho	one Number:		
Attorn Repre	ey Bar senting	Number (if applicable): g ☐ Self or ☐ Attorney for		
	_			
			DURT OF ARIZONA OPA COUNTY	
In the Matter of (check one or both) ☐Guardianship ☐ Conservatorship of		· ·	Case Number: PB	
□an <i>A</i>	Adult o	or 🔲 a Minor	☐ Guardianship and Conservatorship☐ Guardianship☐ Conservatorship	
STATE OF ARIZONA) County of Maricopa) ss.		•	Accounting	
2.	1 2 3 4 5	VHOM I GAVE NOTICE: These are	e the people to whom I gave copies of all the docume	ents
	and/or who h INVES	r conservator, and the person you gave has or will have the guardian or conserva STIGATOR if this is about a " Petition to extra paper if necessary.)	the copies to. Be sure to list the ATTORNEY for the pator if the person is an adult. Be sure to list the COUF of Appoint a Guardian and/or Conservator for an A	erson RT
	Α.	Name:		
	B. C.	Date I gave the documents:		
	D.	Personal service (File "Affida 1st class mail, postage prepa Certified mail		
		Registered mail (attach greer Hand delivery by (name)	n card to this paper)	
	A. B.	Name:		
	C.	Date I gave the documents:		
	D.	How I gave the documents check at	least one box and complete the information: avit of Acceptance" or of process server or sheriff)	

		green card to this paper)
A. B. C. D.	How I gave the documents: How I gave the documents che Personal service (File ' 1st class mail, postage Certified mail Registered mail (attach	eck at least one box and complete the information: "Affidavit of Acceptance" or of process server or sheriff) prepaid green card to this paper) e)
A. B. C. D.	Relationship to person: Date I gave the documents: How I gave the documents che Personal service (File ' 1st class mail, postage Certified mail Registered mail (Attach	eck at least one box and complete the information: "Affidavit of Acceptance" or of process server or sheriff)
SUBSCRIBED	O AND SWORN to before me this	Petitioner's Signature date: by
My Commission	on Expires:	Notary Public:

Case No.